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BROMSGROVE
URBAN DISTRICT COUNCIL

ANNUAL REPORTS

OF THE
MEDICAL OFFICER OF HEALTH
AND
SENIOR SANITARY INSPECTOR

FOR THE YEAR

1948

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STAFF OF THE PUBLIC HEALTH DEPARTMENT — 1948

N. BASTER, M.B., Ch.B., D.P.H.

Medical Officer of Health (Part Time) and Assistant County Medical Officer.

V. PUGH, B.Sc., M.R.C.S., L.R.C.P., M.B., Ch.B.

Deputy Medical Officer of Health, Assistant County Medical Officer.

H. HOLDEN, M.S.I.A., C.R.S.I.

Royal Sanitary Institute Meat and Food Certificate.

Liverpool University Meat and Food Certificate.

Senior Sanitary Inspector, Meat and Food Inspector, Shops Inspector Petroleum Officer.

D. S. SMITH, Certificate S.I.B.,

Royal Sanitary Institute Meat and Food Certificate.

Additional Sanitary Inspector (until 31st August 1948).

C. J. BURFORD, Certificate S.I.B.,

Royal Sanitary Institute Meat and Food Certificate.

Additional Sanitary Inspector.

D. J. WAITE, Certificate S.I.B.,

Additional Sanitary Inspector (from 15th November, 1948).

Clerks

Miss B. WASS, Miss M. D. LEESON, Miss P. WALLACE (from 25th October, 1948).

Members of the Health Committee

1948

Chairman of the Council 1948 : Councillor W. R. Harris

Chairman of the Committee 1948 : Councillor G. Wagstaff

Councillors F. N. Clements, O. Bentley, J. S. Cooke, J. Gibbins, J. J. Hudson, J. H. Kimberley, W. G. Leadbetter, E. R. V. Whittaker, H. Webley, Mrs. Holt.

HEALTH DEPARTMENT,
BROMSGROVE URBAN DISTRICT COUNCIL.

To the Chairman and Members of the Council

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in presenting to you a report on the state of the public health of Bromsgrove for the year 1948 and a report on the work carried out by your Health Department.

In general, the health of the town during the year gave reason for satisfaction: the high post-war birth rate was maintained and the death rate was low, and was substantially lower than the figure for the whole country, nearly fifty-eight per cent of the deaths occurred over the age of sixty-five.

At mid year, the Registrar General estimate of the population was 27,710, an increase of 2,420 over the previous years estimate: the rise of more than 4,000 in the population since before the war gives some explanation of the acute housing shortage in the district.

Some of the Health Department's functions were transferred, following the coming into operation of the National Health Service Act, to the County Council and to the Regional Hospital Board. These services were Diphtheria Immunisation and the Ambulance Service to the County Council, and the Isolation Hospital to the Regional Hospital Board. Our ambulance drivers are to be congratulated on maintaining a very high standard in view of the limitations of a small service. Though these services may be operated on a more generous scale by the larger Authorities I am sure that they will not be operated so economically, and the public would do well to ponder the value of the return they receive from the considerable sums expended.

The services provided by the County Council were maintained at their usual high standard in the district, and the provision of a Home and Domestic Help Service is particularly welcome.

There is still progress to be made in further extensions of the sewers and water mains, but as the properties to be served become more scattered the cost rises, and with enforced reductions in capital expenditure the task becomes increasingly difficult.

Housing remains one of our biggest problems and I have drawn attention to the difficulty of getting repairs carried out to properties in many instances not worth repairing but which still must perform remain in occupation. This is a problem which increases with the further ageing of the property and it is one to which we must find an answer, as it is becoming increasingly clear that new building alone is not going to solve our housing problem for many years to come.

One very disquieting feature was the rise in both notification of, and deaths from, tuberculosis. I gave two possible contributing factors for this, lack of suitable housing accommodation and lack of sanatorium beds. Tuberculosis now constitutes our major public health problem, and one which will need our most earnest attention.

During the year Mr. D. S. Smith, Assistant Sanitary Inspector, left to take up a similar appointment in Trowbridge, Wilts., and Mr. D. J. Waite was appointed to the vacancy. Miss B. Wass was appointed clerical assistant for delegated County Council work and Miss P. Wallace was appointed to take her place.

I would like to thank the Chairman and Members of the Health Committee for their keen interest in the work of the Department and for the help they have afforded us, and I would like to congratulate members of the staff of the department, on a good years work and to thank them for their co-operation throughout the year.

I am, Ladies and Gentlemen,

Your obedient Servant,

N. BASTER, M.D., D.P.H.,

Medical Officer of Health.

SECTION A

Statistics and Social Conditions of the Area

Area : 9,228 acres.

Registrar Generals estimate of Population mid 1948 : 27,710
1947 : 25,290
1946 : 24,600
1938 : 23,540

Number of inhabited houses end of 1948 : 7,379
end of 1947 : 7,303
end of 1946 : 7,201
end of 1938 : 6,902

Rateable Value 1st April, 1948 : £138,924

Sum represented by a penny rate : £549 12 1d.

VITAL STATISTICS

Birth Rate

					Births per 1,000 population :	
1948	1947	1946	1938	1948	(England and Wales)	
18.12	18.58	17.8	17.8	17.9		

Live Births

		M.	F.	Total
Legitimate	....	252	223	475
Illegitimate	....	14	13	27
Total	....	266	236	502

Illegitimacy Rate

(Total live illegitimate births per 1,000 total live births)

1948	1947	1946	1938
53.9	51.1	56.2	33.5

Still Birth Rate (Still Births per 1,000 total births)

1948	1947	1946	1938	(England and Wales)
23.3	28.9	8.9	27.9	

STILL BIRTHS

	<i>M.</i>	<i>F.</i>	<i>Total</i>
Legitimate	6	5	11
Illegitimate	—	1	1
Total	6	6	12

Death Rate

Deaths per 1,000 population

1948	1947	1946	1938	1948 (England and Wales)
9.56	10.7	9.4	12.5	10.8

DEATHS

<i>M.</i>	<i>F.</i>	<i>Total</i>
135	130	265

Infant Mortality

DEATHS OF INFANTS UNDER 1 YEAR OF AGE

	1948	1947	1938	1948 (England and Wales)
--	------	------	------	--------------------------

Deaths of legitimately born infants under 1 year of age per 1,000 legitimate births	33.7	26.9	56.9	—
Deaths of illegitimately born infants under 1 year of age per 1,000 illegitimate births	74.1	41.7	166.7	—
Deaths of all infants under 1 year of age per 1,000 live births	35.9	27.7	59.8	34.5

INFANT DEATHS

	<i>M.</i>	<i>F.</i>	<i>Total</i>
Legitimate	10	6	16
Illegitimate	1	1	2
Total	11	7	18

Maternal Mortality

Maternal deaths per 1,000 total births

1948	1947	1946	1938	1948 (England and Wales)
—	2.06	—	1.17	10.8

CAUSES OF DEATH IN THE BROMSGROVE URBAN
DISTRICT 1948

<i>Cause of Death</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>	<i>Mor-tality Rate</i>
1. Typhoid and Paratyphoid Fever	0	1	1	0.04
2. Cerebro-Spinal Fever	0	1	1	0.04
3. Scarlet Fever	0	0	0	0.00
4. Whooping Cough	0	0	0	0.00
5. Diphtheria	0	0	0	0.00
6. Tuberculosis of Respiratory System	11	5	16	0.56
7. Other Forms of Tuberculosis	3	0	3	0.11
8. Syphilitic Diseases	1	0	1	0.04
9. Influenza	0	0	0	0.00
10. Measles	0	0	0	0.00
11. Acute Poliomyelitis, and Polio-encephalitis	0	0	0	0.00
12. Acute Infectious Encephalitis	0	0	0	0.00
13. Cancer of Buccal Cavity and Oesophagus (<i>M</i>) Uterus (<i>F</i>)	1	2	3	0.11
14. Cancer of Stomach and Duodenum	11	5	16	0.56
15. Cancer of the Breast	0	6	6	0.22
16. Cancer of all other sites	16	8	24	0.85
17. Diabetes	1	1	2	0.07
18. Intra Cranial Vascular Lesions	11	13	24	0.85
19. Heart Disease	29	40	69	2.49
20. Other Disease of Circulatory System	2	8	10	0.36
21. Bronchitis	6	1	7	0.25
22. Pneumonia	4	3	7	0.25
23. Other Respiratory Diseases	2	4	6	0.22
24. Ulcer of Stomach and Duodenum	1	0	1	0.04
25. Diarrhoea (under 2 years)	0	0	0	0.00*
26. Appendicitis	0	3	3	0.11
27. Other Digestive Diseases	4	5	9	0.32
28. Nephritis	3	2	5	0.18
29. Puerperal and Post Abortive Sepsis	0	0	0	0.00
30. Other Maternal Causes	0	0	0	0.00
31. Premature Birth	4	1	5	0.18
32. Congenital malformation, birth injuries and other infant disease	5	6	11	0.40
33. Suicide	3	0	3	0.11
34. Road Traffic Accidents	3	0	3	0.11
35. Other Violent Causes	6	2	8	0.29
36. All Other Causes	8	13	21	0.77
TOTALS	135	130	265	9.56

COMMENT ON THE VITAL STATISTICS

The Population

The population continues to rise, increasing during the year by 2,420, of this 237 is from the excess of births over deaths, and 2,183 from immigration: the increase from immigration has probably been spread over the last two or three years as the Registrar General made a re-estimate during this year considerably greater than his previous estimate.

The Birth Rate

The birth rate (18.12 per 1,000 population) remains higher than the pre-war figure and compares favourably with that of the previous year. While it was generally expected that there would be a rise after the war it is worthy of comment that the higher post-war figures have been maintained. With the continual fall of the death-rate the number of births during the year was nearly double the number of deaths, which would indicate that the population is more than replacing itself.

The Illegitimacy Rate

(53.9 per 1,000 live births) shows a slight rise compared with the previous year's and is still considerably above the pre-war figure (33.5).

The Still Birth Rate

(23.3 per 1,000 total births) shows a reduction compared with the previous year's figure. Expressed as a rate per 1,000 of the population at 0.43 it is almost the same as the national figure of 0.42. It should still be regarded as possible of reduction, and the improved maternity services, which should follow the introduction of a National Health Service should make some improvement in the figure.

Maternal Mortality

It is pleasing to record that there were no deaths in childbirth or ascribable to pregnancy during the year.

The Infant Mortality Rate

(35.9 per 1,000 live births). Infant mortality unfortunately shows a rise compared with the previous year (27.7), though it is only slightly higher than that of the whole country (34.5). It is, however, much lower than that obtaining in previous years. As we are dealing with only very small figures fluctuations such as this are to be expected. As we come nearer to dealing with the hard core of infant deaths the rate of improvements must be expected to slow down. At 35.9 it is substantially below the pre-war figures.

The Death Rate

(9.56 per 1,000 population) shows a reduction compared with the previous year and is substantially lower than the National figure (10.8) or the figure for the 148 smaller towns (populations of 25,000—50,000 at the 1931 census) which was 10.7

The major causes of death by percentage

1. Diseases of the heart and circulatory system	....	38.8%
2. Cancer (all forms)	....	18.5%
3. Respiratory Diseases (excluding Tuberculosis)	....	7.5%
4. Tuberculosis	....	7.2%

The major causes remain substantially the same as last year: though the percentages have varied. Deaths from diseases of the

heart were slightly more, the greater proportion of them were natural deaths from old age: the proportion due to cancer was considerably lower than that of the previous year, 18.7% compared with the previous year 25%. In general in recent years there has been a rise in the proportion of deaths due to cancer and it will be of interest to see if this fall is maintained. The proportion of deaths due to Tuberculosis 7.27% is considerably higher than that of the previous year (5.51%) the actual number was 19 compared with 15 an increase of four: this is rather disappointing as we are now looking for a decrease in the number of deaths due to tuberculosis.

Percentage distribution of deaths by Age

<i>Age at Death</i>	<i>%</i>
0—1 year	6.41
1—14 years	3.77
15—44 years	7.17
45—64 years	24.90
65 and over	57.75

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES

(a) Clinics and Treatment Centres

<i>Clinic</i>	<i>Situation</i>	<i>Time of Holding</i>
Bromsgrove Infant Welfare Centre	Recreation Road	Wednesday 2 p.m.
Catshill Infant Welfare Centre	Baptist Chapel	1st & 3rd Friday 2 p.m.
Bromsgrove Ante-Natal Clinic	Recreation Road	Monday 10—12 noon and 2—4 p.m.
School Clinic	Recreation Road	Monday and Wednesday 10 a.m. to 12 noon
Dental Clinic	Recreation Road	As arranged
Tuberculosis	Recreation Road	Tuesday 2 p.m.
Rubery Ante-Natal Clinic	St. Chad's Church Hall	1st and 3rd Thursdays 10 a.m.
Rubery Infant Welfare	St. Chad's Church Hall	1st and 3rd Thursdays 2 p.m.
Diphtheria Immunisation	Recreation Road	2nd and 4th Wednesdays 11 a.m.

A great deal of valuable work directed towards the preservation of health and the prevention of disease is carried out in these clinics by the Medical and Nursing Staffs. In the Welfare Centres there is additional assistance which is greatly appreciated from voluntary workers.

Midwifery Services

(b) Ante-Natal Services are provided in the ante-natal clinics or may be given by the General Practitioners as part of their services under the National Health Service Act. For her confinement a mother may choose to have either the services of her own doctor or those of the district midwife, employed by the County Council. There has been a tendency for the status of the midwife to be lowered, in the eyes of the public, by the National Health Service Act giving a choice of the persons own doctor or a midwife, rather implying that the midwife is a second best choice: this is not generally so, the district midwives are fully trained and have specialised in dealing with the normal confinement and in detecting the abnormal and they give their whole time to this special branch of medical work.

(c) Laboratory Facilities

Laboratory Services have, since July, been provided by two agencies. The County Laboratory, County Buildings, Worcester deals with chemical examination and the bacteriological examination of water and milk. The Public Health Laboratory, at the Royal Infirmary, Worcester, deal with clinical bacteriology, swabs, sputum, blood, etc., and with the bacteriology of food stuffs other than milk.

(d) Hospitals

The following hospital services were provided directly by arrangement with the County Council, since July 5th all have been provided by the Regional Hospital Board. The County Medical Officer has retained some control over admissions to the Maternity Homes, as the criteria upon which admission is given are often of an environmental nature and your District Medical Officer of Health has some influence over admissions to the Isolation Hospital as co-ordination with the general preventive services may be required. As far as one can see the change in hospital administration made very little difference to the service during 1948.

1. Infectious Disease (including Tuberculosis)	....	....	Bromsgrove, Droitwich & Redditch Joint Hospital, Bromsgrove.
2. Tuberculosis	....	....	Knightwick Sanatorium.
3. Smallpox	....	....	Hayley Green Sanatorium.
4. Maternity	....	....	W.C.C. Smallpox Hospital, Worcester.
5. Children's Diseases	....		Mary Stephens Maternity Hosp.
6. Tonsils and Adenoids	....		Lucy Baldwin's Maternity Hosp.
7. Puerperal Pyrexia and Fever			Rigby Hall Maternity Hospital.
			The Children's Hospital.
			Bromsgrove Cottage Hospital.
			The General Hospital, B'ham.
			The Royal Infirmary, Worcester.

8. Mental Illness	.....	.....	Barnsley Hall Mental Hospital, Bromsgrove.
9. General Medical and Surgical			Powick Mental Hospital, Malvern.
Cases	.....	.....	Bromsgrove Cottage Hospital. The Birmingham Hospitals.

(e) The Ambulance Service

An ambulance service was provided by the Council until July 5th, when it passed to the County Council. One ambulance was maintained always available, and in emergency others were provided by arrangement with neighbouring districts. The service suffered from the inherent drawback of lack of elasticity due to its smallness, on the other hand it was not an expensive service and it functioned reasonably well. The user paid a charge for the service. Since July 5th, the County Council have provided a more comprehensive and elastic service free of charge to the user.

Voluntary associations have provided accompanying nurses. Up to July 5th the work of the ambulance was as follows:—

Total Calls	579
Patients Carried	583
Accident	30
Maternity.....	83
Other Cases.....	470
County Cases	60
Milcage	8624

An ambulance operated from the Isolation Hospital, is available for cases of infectious disease.

(f) Diphtheria Immunisation Service (See Section F.)

Until July 5th this was provided by this Council for children over the age of 5 years and by the County Council for children under 5 years of age. Since July 5th the County Council have been responsible for the provision of the service for children of all ages.

(g) Health Education

The Council subscribes to the Central Council for Health Education. Publicity by leaflets and posters was carried out in connection with the diphtheria immunisation campaign, and against various prevalent infectious diseases.

Under the National Health Service Act the County Council becomes responsible for general health education, but it will still be necessary for this Council to continue to carry out publicity and propaganda campaigns as part of the disease prevention service.

(h) Vaccination

Facilities for vaccination against smallpox are provided by the County Council under the same arrangements as are made for diphtheria immunisation. The service for both is organised locally from your health department where the relevant records are kept.

(i) Home and Domestic Help

Following the coming into operation of the National Health Service Act, a home and domestic help service was inaugurated by the County Council in the district, operated by the agency of the W.V.S. from their offices at New Road.

The service which provides domestic help in cases of emergency, such as confinement, serious illness or in some cases for old persons, began well and promises to fulfil a long felt want with considerable efficiency. It was under the management during the year of Mrs. M. Jarvis, who is to be congratulated on having made an excellent start.

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA

A detailed statement of the sanitary state of the area and of the work carried out by the Inspectors is given in a report by your Senior Sanitary Inspector. A considerable amount and variety of work has been done and the Council have been well served in this respect during the year.

Sound and efficient sanitary inspection is the basis of all public health and although it is largely inspectorial and other routine work, the results of which are not obvious immediately, its absence becomes increasingly felt and culminates in disaster.

So free has the population been rendered from the more obvious diseases that the public seldom realise the enormous amount of work carried out every day, throughout the country for their protection, and it is only on rare occasions when some disaster occurs through some flaw in the armour that they get any idea of what things would be like without the protection given.

WATER SUPPLIES

The water supply of almost the whole of the area is piped and supplied by the East Worcestershire Waterworks Company, the water is obtained from two sets of boreholes, one at Burcot, and the other at Washing Stocks. It is frequently sampled by the Waterworks Company, copies of the reports are sent to the Health Department and two specimen reports are given below. The Health Department also take samples of the water as distributed.

(a) Sample Marked Burcot—"Lambert" (Burstot)

Physical Characters	Clear		
Odour	None		
Deposit	None		
Chemical Examination (Results expressed in parts per 100.000)			pH 7.1
Solids in suspension (Dried at 100°C.)	....	....	....
Solids in Solution (Dried at 100°C.)	....	....	....
Solids in Solution. After Ignition	....	....	....
Chlorides calculated as common salt	....	....	....
Hardness Permanent	....	....	....
Hardness temporary	....	....	....

Hardness Total	....	....	....	....	....	16
Free and Saline Ammonia	....	....	....	....	....	0.0008
Albuminoid Ammonia	....	....	....	....	....	0.0008
Nitric Nitrogen (Nitrates)	....	....	....	....	....	Trace
Nitrous Nitrogen (Nitrites)	....	....	....	....	....	None
Oxygen absorbed in 4 hours at 27°C.	....	....	....	....	....	None
Toxic Metals	....	....	....	....	....	None
						detected
Free C.O.2	....	....	....	....	....	2.4

Bacteriological Examination

Number of Colonies developing upon Agar.

(a) In two days at 37°C. 1 per 1ml.

(b) In three days at 22°C. 1 per 1ml.

Coli Aerogenes (Presumptive Coli) Count Nil per 100 ml.

Opinion:—The sample is fit for drinking.

(Signed) M. M. LOVE.

17.11.48

(b) Sample Marked Washing Stocks—"Bigwood" (Washing Stocks)

Physical Characters	Clear
Odour	None
Deposit	None

pH 7.6

Chemical Examination (Results expressed in parts per 100.000)

Solids in suspension (Dried at 100°C.)	....	....	....	None
Solids in Solution (Dried at 100°C.)	....	....	....	34
Solids in Solution. After Ignition	....	....	....	30
Chlorides calculated as common salt	....	....	....	3.2
Hardness Permanent	....	....	....	13
Hardness Temporary	....	....	....	12
Hardness Total	....	....	....	25
Free and Saline Ammonia	....	....	....	0.002
Albuminoid Ammonia	....	....	....	0.002
Nitric Nitrogen (Nitrates)	....	....	....	Trace
Nitrous Nitrogen (Nitrites)	....	....	....	None
Oxygen absorbed in 4 hours at 26°C.	....	....	....	0.013
Toxic Metals	....	....	....	None
				detected

Bacteriological Examination

Number of Colonies developing upon Agar.

(a) In two days at 37°C. 10 per 1 ml.

(b) In three days at 22°C. 55 per 1 ml.

Coli Aerogenes (Presumptive Coli) Count Nil per 100 ml.

Opinion:—The sample is fit for drinking.

(Signed) M. M. LOVE.

17.11.48

During the year 35 samples were examined chemically and bacteriologically and found satisfactory. Throughout the area supplied by the mains the water was adequate in quantity and the quality was satisfactory.

In parts of the district where mains water was not available wells are used: the yield of which varies in quantity and quality. Sixty-one samples were taken from wells during the year with the following results:—

<i>No. of Samples Fit for Drinking</i>	<i>No. of Samples Unfit for Drinking</i>	<i>No. of Doubtful Samples</i>
14	19	28

During the year, apart from extensions of existing mains to new housing estates, three new schemes were completed.

- (1) Little Heath Lane
- (2) The Dock, Catshill
- (3) Buntsford Hill

Types of Water Supply in the District

<i>Supply</i>	<i>No. of Houses</i>	<i>Approximate Population</i>
Served by mains supply direct to the house	6837	25536
Served by Standpipe	401	1530
Served by Well or Spring	141	644

DRAINAGE AND SEWERAGE

In general the majority of houses in the district are served by sewerage, although a survey of the district shows that at present 1202 are served by cesspools and septic tanks and 750 by pails and other conservancy methods. Improvement comes slowly as the extension of sewers is very costly and slow and in general the areas now requiring sewerage tend to be the more rural parts of the district where houses are more scattered; therefore, the cost per house is in many cases prohibitive. This is one of the fields in which the benefit of Town and Country Planning may be felt as building may be directed away from areas where sewerage facilities cannot be readily provided. Parts of the North end of the District not sewered are:—

Twatling Road, Monument Lane, High House Drive,
Lickey Square, Lickey Rock, Bournheath, parts of
Catshill, and Blackwell.

Some of these schemes will, it is certain, be proceeded with in the fairly near future.

During the year a machine was delivered for cesspool emptying and a service was put into operation. The modern sewerage disposal works are situated at Stoke Holloway, and gave satisfactory service during the year.

PUBLIC CLEANSING

Refuse collection and disposal are supervised by the Surveyor. The collections of house refuse are weekly in the town and fortnightly in the more rural districts but these periods are considerably interfered with by labour difficulties and holidays.

Refuse collection is now becoming a major problem exercising the attention of Local Authorities as labour shortage is becoming increasingly felt. Presumably the only solution is going to lie in increasing the efficiency of the present removals systems, as it is unlikely that the labour situation will greatly improve.

The number of loads from bins was 1,839 and the number of night soil loads 433.

RODENT CONTROL

The work of rodent control was continued during the year. A summary is included in the Sanitary Inspectors' Report. This is very valuable work as, apart from the considerable danger to health caused by the rats which are known to carry a number of infections, considerable economic loss is occasioned by them, from the food they eat and the damage they do.

FACTORIES

The Council maintains a Register of Factories and carries out inspections under the Factories Act, to ensure adequate sanitary provision, and means of escape from fire, and to ensure the suitability of drinking water supplies. In the case of factories in which no mechanical power is used all the provisions of the Factories Act with regards to inspection are carried out by the Local Authority. This deals with cleanliness, overcrowding, temperature control, ventilation and drainage of floors. Details of the work carried out is given in the Sanitary Inspectors' Report.

RIVERS POLLUTION AND PREVENTION

This is undertaken by the County Council. In this district during the year there was a pollution from a factory and a pollution from private houses in Stourbridge Road. The former was dealt with by the County Council and a scheme is in operation for the provision of a sewer in Stourbridge Road to prevent the latter.

SMOKE ABATEMENT

Nuisances from smoke, are not a problem in this district and none were reported last year.

TENTS, VANS AND SHEDS

In view of the present acute housing shortage the Council have approved the use of sundry vans and sheds as temporary dwellings for periods of 6—12 months.

The proximity of Birmingham leads to considerable shack dwelling in the surrounding, more rural, areas and a strict watch is kept in order that uncontrolled shack development does not take place in this area. While feeling sympathy for people without houses in Birmingham, we must bear in mind that their coming to live in insanitary conditions in the district would endanger the health of the people already living in the district.

SECTION D.

HOUSING

The work of the Health Department in connection with Housing has four main branches: (1) The maintenance of dwelling houses in a sanitary and habitable state, (2) the demolition or closure of houses which are insanitary or unfit for habitation and cannot be repaired at reasonable expense, (3) the clearance and re-developement of areas where insanitary dwellings are congested (slum clearance) and (4) the prevention and abatement of overcrowding.

A little more progress was made in 1948 than in the preceding year though it was still relatively insignificant. The work of maintenance of dwelling houses continued to be confined to the absolute minimum. It constitutes one of the major problems as in the town we have a considerable amount of old property. Some of this property was reaching the end of its life prior to the war and but for the war would have been demolished. In 1939 work on demolition was suspended, and has generally remained suspended since, owing to the acute housing shortage. Therefore it means that we have a number of properties which were rapidly becoming unfit for habitation prior to the war and which have received no maintenance since then. As many of these properties were reaching the end of their lives, they were let at very low rentals before the war and have been at this rental ever since. They are in need of considerable and extensive repair and as the cost of repair is now three or four times the pre-war cost and even with extensive repairs they would only have a limited life, their repair is now totally uneconomic in many cases.

On the other hand owing to the housing shortage, they cannot be demolished. As we have in the district an acute housing shortage it would seem that this problem will become worse with the passage of time and though during the year the Inspectors made valiant efforts to get repair work carried out, they were often unsuccessful.

The obvious long term solution lies in the building of more houses —short term it must lie in getting the minimum adequate work done and making use of the cheapest methods possible. The Council might consider the acquisition of some of these old properties which they might consider repairing or improving and letting at higher rentals as Council Houses. In a preliminary survey, made in 1938, 1,290 houses were found in the class requiring demolition either as unfit houses or in clearance areas. As little has been done to these areas since 1938 one can get an idea of the condition of a good deal of property in the town.

During the year six houses were demolished on account of their becoming structurally unsafe.

The day when we can again begin clearance and redevelopment seems, now, to be almost out of sight, as we have some 1,200 names on the list of housing applicants and building seems to be of the order of about 150 each year, it would seem that it will be many years before the clearance of unfit houses can be started again on any reasonable scale.

The extent of overcrowding in the district is not known and little purpose would be served at the present moment in carrying out a survey as the position changes rapidly. Owing to the proximity of Birmingham with its enormous population and acute housing shortage, it will be obvious that any housing accommodation happening to fall vacant will immediately be filled up.

Therefore, I would not advise the expenditure of money on an overcrowding survey until we are nearer satisfying our acute housing shortage.

During the year, the number of houses erected, at 178, was 43 more than that of the previous year. This, while being only a small figure compared with the number required cannot be considered too bad an achievement when one considers that Bromsgrove does not appear to be a priority area and there can be little doubt that, but for restrictions placed upon the number of houses which can be built, the Council would have provided substantially more than this figure. The housing position at the end of 1948 was as follows:—

Number of Houses in the district at the end of 1948	7379
Number of Persons per House	3.8
Number of Houses built by Private enterprise and by the Council	178
Number of Houses under construction at end of year	113
Number of Houses demolished during 1948	6

SECTION E.

INSPECTION AND SUPERVISION OF FCCD

Control of conditions under which food is prepared, stored and sold is exercised by the Council under the Food and Drugs Act, 1938; although the Act was passed eleven years ago its implementation has been slow owing to the extent of the problems with which it has to deal and to the intervention of the war years.

Food Premises

The conditions in which food is prepared and sold in general leaves much to be desired owing to the shortcomings in both premises and staff. Premises are often unsatisfactory and efforts to improve them have been greatly handicapped in the past by shortages of labour and material. Your inspectors make frequent visits to these premises and have exerted all the pressure possible to have their standard improved. This is slowly bearing fruit and we are seeing general improvements in the standard of the premises used for food preparation. Co-operation with the Ministry of Food has been valuable in this respect.

The bigger problem would appear to be that of the food handler. In many cases their standard of food hygiene is a good deal less than what is required. In some cases, I feel, they are beyond training. Considerable efforts must be made in the future in the training of food handlers and there is no doubt that a start should be made by the Education Authorities in the schools, where they can instil some of the basic principles; later on careful supervision would be necessary but it must be appreciated that unless a person is fundamentally capable of taking all reasonable precautions a periodic visit by the Sanitary Inspectors is going to be of relatively little value.

The considerable increase in the amount of food poisoning during the last few years is regarded as probably due to the increasing tendency for people to feed communally, this question of clean food handling is one that must engage our attention, therefore, for some considerable time to come. One further point is, that as increasing publicity is given and if training in the schools is carried out, the public in general would become aware of the desirability of caring for their food and of demanding a high standard in the establishments serving them. In general they should be encouraged to report complaints to the Health Authority and to bring to the Health Department any food, about which they are in any doubt, as the examination of this food may save them unnecessary suffering and will assist the Health Department in preventing food poisoning.

Meat

Meat is delivered under arrangements made by the Ministry of Food from Birmingham, to local distribution depots for distribution to butchers shops. During the year a satisfactory type of van was provided for its transport which is used for the transport of meat only. While not being the ideal van it is a great improvement on those formerly used.

Milk

With an increase in the amount of milk supplied by larger retailers during the year there was an increase in the proportion of designated milk consumed. As milk is a very good culture medium for the growth of bacteria causing disease in man, its possibilities as a vector of disease are considerable. Careful examination of work carried out to investigate the effect on milk of pasteurisation, failed to show that it had any deleterious effects on its quality. While Tuberculin Tested Milk can be presumed to be free of tuberculosis organisms it is possible for it to be contaminated with organisms causing a variety of other diseases, and therefore, it would seem reasonable that if we are finally to prevent milk-borne disease we should require the pasteurisation of all milk. This process does not add greatly to the cost of the milk but it does ensure its purity, and one's advice from a health point of view, to the public must be to request the pasteurisation of milk.

In the area there are 34 dairy farms and approximately 390 dairy cows. The year 1948 was the last full year in which the inspection of milk production was under the supervision of the Local Authority, in 1949 it will pass under the control of the Ministry of Agriculture.

During the last 20 years or so, the Sanitary Inspectors' Departments of the Local Authorities have done much to improve the quality of milk and continual progress has been made. Before the war, progress was more difficult as many dairy cows were diseased, many farm premises were insanitary, and in general, agriculture was short of money. During the last few years, owing to the increased demand for milk and the prosperity of farming, very marked progress has been made and in general the quality of milk produced today is high and we are within sight of being able to see that undesignated milk is no longer consumed by the public. The Ministry of Agriculture have now established what must be a very expensive inspectorial service in order to complete work, the greater and more difficult part of which, has

been carried out by the Local Authorities. It does seem curious that at a time when economy is being preached this expensive service should be inaugurated when the need for it has largely passed. It can scarcely be considered as a good example to Local Authorities to economise in their expenditure.

Ice Cream

The premises where ice cream is prepared and sold are licensed by the Local Authority and your inspectors pay frequent visits to ensure that they are satisfactorily conducted and that every precaution is being taken to ensure the purity of Ice Cream. They also take samples of Ice Cream from time to time, which are submitted for bacteriological examination in order to assess the purity of the product.

Provisional grades were fixed to describe the purity and freedom from contamination; of the samples taken during the year some three quarters came in the first grade. I think that we can feel that in the district the conditions under which Ice Cream is prepared and sold are satisfactory and that the product which is sold to the public has a good standard of purity.

SECTION F.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES NOTIFIABLE DISEASES DURING THE YEAR 1948

<i>Disease</i>	<i>Corrected Notifications</i>	<i>Admissions to Isolation Hosp.</i>	<i>Deaths</i>
Smallpox	0	0	0
Diphtheria	14	13	0
Scarlet Fever	29	8	0
Measles	45	2	0
Whooping Cough	9	1	0
Typhoid Fever	1	1	1
Paratyphoid Fever	0	0	0
Dysentery	1	0	0
Cerebro-Spinal-Fever	1	1	1
Acute Poliomyelitis	0	0	0
Encephalitis	1	1	1
Acute Pneumonia	19	4	7
Puerperal Pyrexia	13	13	0
Ophthalmia Neonatorum	1	1	0
Erysipelas	3	0	0
TOTAL	136	44	10

Smallpox

There were no cases of smallpox in the district during the year although with the increase in air traffic it is important for continued vigilance to be exercised and the need to be impressed upon the public of having their children vaccinated. This is also of value as very many more people go abroad than was formerly the case and have, therefore, become exposed to infection.

Diphtheria

There was a rise in the incidence of diphtheria during the year. It was accounted for generally by cases in two institutions in the town; into which it was apparently imported from outside the district. It was successfully controlled in these institutions and did not spread beyond them.

Diphtheria Incidence and Mortality 1939-48		
Year	Cases	Deaths
1939	82	2
1940	50	1
1941	55	1
1942	37	1
1943	21	0
1944	16	0
1945	13	1
1946	8	0
1947	8	0
1948	14	0

Diphtheria Immunisation

The number of children who completed a course of immunisation during the year 1948 was as follows:—

Primary Immunisation

Under 5 years	....	....	....	417
5-14 years	....	....	....	111
Total	....	....	....	528
Reinforcing "Booster" injection	....	....	....	257

The "immunisation state" of Bromsgrove children on 31st December was as follows:—

Age (Years)	0-1	1-	2-	3-	4-	5-9	10-14	Total
No. immunised	14	291	275	216	318	1727	1401	4242
Population (approx.)		Children under 5				5-14 years		
% Immunised		2427				4030		6457

The comparable figures on December 31st, 1947, were:—

% Immunised	Children under 5	5-14 years	Total
	40.5%	77.8%	63.3%

The number of children immunised during the year for the first time shows a considerable rise though the number receiving "Booster injections" a corresponding fall. This latter is probably accounted for by the fact that a campaign in the schools was carried out towards the end of 1947.

The immunisation state during the year of pre-school children, who form the most important group, showed a welcome and considerable rise, standing now at just below 50%. It must be remembered that during the year children were not immunised until their first birthday, the possible maximum in the case of pre-school children is then 80% and though one cannot regard the position as entirely satisfactory, it is at the present moment reasonably good.

As many of the children in the town were probably immunised by their own doctors the percentage is probably very much higher. It is hoped that in 1949 reliable figures of the exact position will be obtained. During 1948 samples of children taken showed that of the children under 5 years very nearly all over the age of one have been immunised.

Scarlet Fever

The incidence of scarlet fever fell considerably during the year. In general there is probably no less about than there ever was but for some reason its severity is greatly reduced.

As scarlet fever can be regarded as sore throat and a rash, as it gets increasingly mild in character the rash is likely to be missed. Owing to the widespread distribution of the causative organism and the mildness of the illness much less stringent precautions are taken nowadays for its control. Its complications however, still remain with us; one cannot impress upon parents too strongly the necessity for taking children, in whom there is any discharge from the ear, for prompt medical attention.

Measles

The incidence of measles fell sharply during the year and it does appear now that measles has resumed its pre-war two yearly periodicity. Though the disease itself is generally mild it must still be regarded as a serious illness due to the complications which often follow it, particularly if care and attention are not bestowed on its treatment and nursing, and parents should invariably ask medical advice when their children have measles.

Whooping Cough

There was a rise in the incidence of whooping cough and it should be regarded in much the same way as measles, as it often gives rise to complications and once again parents should invariably seek medical advice for their children suffering from whooping cough.

In recent years considerable work has been carried out in the preparation of a prophylactic against whooping cough, and those used in the last few years appear to afford considerable protection. In Bromsgrove, Dr. Pugh has immunised a considerable number of children attending the clinics against whooping cough, and I think that the effects of recent trials makes it safe for us to advise with some confidence, the protection of children by immunisation. A number of private practitioners have used the combined prophylactics for whooping cough and diphtheria.

Puerperal Pyrexia

The incidence of puerperal pyrexia would appear to be rather high but it must be remembered that most of the cases were maternity homes cases which were, in all probability, removed into the district because of the occurrence of puerperal pyrexia.

Tuberculosis

Tuberculosis is notified to the Urban District Council and a Register is kept. Officers of the Health Department visit to advise as to preventive measures, particularly where the sanitary state of the living conditions is unsatisfactory. Homes are visited where deaths have occurred from tuberculosis and disinfection carried out.

The tuberculosis service for diagnosis, treatment, aftercare and general supervision is provided by the County Council through the tuberculosis dispensary and through the agency of home visits by tuberculosis nurses. At the dispensary cases are examined, treatment is given, follow up is carried out after treatment and contacts are examined. X-ray is carried out at the Smallwood Hospital at Redditch. Since July 5th, treatment was administered by the Regional Hospital Board.

The state of the Tuberculosis Register is as follows:—

	Male	Female	Total
Pulmonary	75	52	127
Non Pulmonary	19	19	38
TOTAL	94	71	165

Tuberculosis Incidence and Mortality 1948

Age	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0-	—	—	—	—	—	—	—	—
1-	—	1	2	2	—	1	1	2
5-	1	—	—	2	—	—	—	2
10-	—	1	—	2	—	—	—	2
15-	1	—	—	—	—	1	—	—
20-	3	1	2	—	2	2	1	—
25-	3	4	2	—	1	1	—	—
35-	1	1	—	—	4	—	—	3
45-	3	1	—	—	—	2	—	—
55-	2	—	1	—	3	—	1	—
65 and over	—	—	—	—	2	—	—	—
Age unknown	—	1	—	—	—	—	—	—
TOTAL	14	10	7	6	14	5	3	4
		24		13		26		3

Tuberculosis patients are in need of various forms of assistance, attention and medical treatment.

During the year 37 new cases of tuberculosis were notified 24 being pulmonary and 13 non pulmonary. This was a considerable increase on the previous year when 27 new cases were notified. There were 29 deaths which was also a considerable increase on the previous year when there were 15. Of the deaths 26 were pulmonary and 3 non pulmonary. When one considers that these 3 deaths from non pulmonary tuberculosis were probably caused by the consumption of tuberculosis infected milk it reinforces our plea for the pasteurisation of all milk, the cost of which would be a small price to pay for the consequent saving in suffering and death.

The failure of tuberculosis to resume its pre-war downward trend cannot but be regarded with alarm. In between the two wars the incidence of tuberculosis fell steadily. This fall was arrested during the war and it was expected that with the cessation of hostilities the fall would be continued. The probable reason for the failure of the incidence to fall are firstly the appalling conditions of overcrowding in which many people are forced to live, and secondly failure to provide adequate hospital facilities. In many instances infectious cases of tuberculosis are diagnosed and have to spend many months before a bed in a sanatorium can be obtained for them. This reduces, to a considerable degree, their chances of survival and where living conditions are poor, puts the other members of the house in considerable risk.

Tuberculosis constitutes our major public health problem and, if for no other reason, every effort should be made in the production of houses, if the dangers of tuberculosis are to be lessened.

The disease presents three very serious aspects, firstly, it tends to be a relatively long disease going on for some time and causing the sufferer, very often a young adult in the best years of his life, considerable hardship for his family, secondly treatment is long and expensive and lastly it has a high death rate. The factors greatly increase its importance and complicate its control, and we must, in the next few years make strenuous efforts for its reduction.

REPORT OF THE SENIOR SANITARY INSPECTOR FOR THE YEAR 1948

MR. CHAIRMAN, LADIES AND GENTLEMEN,

A large proportion of the time of the Sanitary Inspectors was devoted to dealing with complaints and remedying urgent nuisances often at houses which have outlived their useful life. The shortage of housing accommodation has resulted in property of this type being kept in use. Owners of such property are naturally reluctant to spend money when they can see very little return and ultimate demolition, but the tenants have a right to expect a reasonable standard of comfort for the rent paid. The difficulty of dealing with owners and tenants of property of this type can well be imagined.

Food Inspection has been given very careful attention during the year, and on every occasion possible the Inspectors have stressed the necessity for clean food handling. The provisions of the Food and Drugs Acts relating to the provision of hot water in food premises are being stressed and although there is still much to be done, in this direction, the results of the Inspectors' labours, so far, are satisfactory.

I should like to record my appreciation of the work of the staff of the department, both clerical and technical and express my gratitude to the Chairman and Members of the Health Committee for their unfailing support in all our efforts. The work is made much easier for me by the co-operation I receive from the Clerk of the Council, Mr. F. A. Jessop, Dr. Baster, the Medical Officer of Health, Mr. Goodman, the Surveyor and other Officers of the Council.

H. HOLDEN,

Senior Sanitary Inspector.

INSPECTIONS

Inspections carried out in the year are recorded below:—

	<i>Primary Inspections</i>	<i>Re- inspections</i>
Houses under Public Health Acts	303	1131
Overcrowding	42	1
Water Supply	270	283
Tents, Vans and Sheds	38	24
Schools	2	2
Entertainment Houses	1	2
Ashes Accommodation	353	323
Accumulations	19	8
Animals or Birds	5	3
Yards, Courts, etc.	1	4
Piggeries	22	1
Drainage Inspections	782	552
Drainage Tests	61	—
Closets—Water	190	172
Pails or Privies	106	24
Cesspools	374	41
Urinals	21	2

Sewers and Street Gullies	....	....	57	3
Cowsheds	....	....	38	7
Milkshops and Dairies	....	....	68	8
Ice Cream Premises	....	....	92	3
Slaughterhouses for Meat Inspection	....	....	12	—
Food Preparing Premises	....	....	67	12
General Food Premises	....	....	104	2
Cottagers Pigs	....	....	445	2
Factories	....	....	64	9
Bakehouses	....	....	14	1
Shops Act	....	....	3	—
Rats and Mice Acts	....	....	113	4
Building Licences	....	....	524	1
Verminous Premises	....	....	18	4
Infectious Diseases	....	....	91	1
Houses Disinfected	....	....	17	—
Housing—Section 11	....	....	14	30
Section 25	....	....	—	27
Other visits	....	....	166	29
Smoke Abatement Observations	....	....	1	—
Petroleum Act	....	....	17	—
Sanitary Survey	....	....	1889	69
Miscellaneous Visits	....	....	349	7
Interviews, Owners, Tradesmen, etc.	....	....	409	—
			7162	2792
			—	—

MEAT AND FOOD INSPECTION

The Government policy of Centralised slaughtering has continued during the year. No animals for sale for human consumption are killed in the slaughter houses in the district, all meat being delivered to a local depot and distributed to butchers from there. Inspections are carried out at the Depot from time to time and conditions generally are satisfactory at this Depot, considering that the arrangement is only a temporary one. The future slaughtering policy should now be declared so that authorities can plan ahead and decide whether a public abattoir should be provided to serve their districts.

The number of pigs killed under the self suppliers scheme increased during the year and 447 inspections were carried out on request from householders. The following table shows the amount of pig meat, etc., which was found to be unfit for human food.

	No.	Reason for Surrender	Weight
Whole Carcasses	2	1—Generalised Tuberculosis } 1—Fevered and Dropsical }	450 lbs.
Heads	17	Tuberculosis.....	343 lbs.
Lungs	8	6—Tuberculosis	36 lbs.
	Sets	2—Congestion	36 lbs.
Mesenterics	11	Tuberculosis.....	36 lbs.
Intestines	3	Tuberculosis.....	23 lbs.

Livers.....	3	Tuberculosis.....	15 lbs.
Hearts.....	3	2—Pericarditis	4 lbs.
		1—Endocarditis	

A list of foodstuffs surrendered after examination at Wholesale depots and shops is set out below:—

English Beef	532 lbs.	Pudding Mixtures....	138 Packets
Imported Beef.....	175 lbs.	Barley Flour	6 Packets
Cheese	8 lbs. 6 ozs.	Sponge Mixture	57 Packets
Butter	26 lbs.	Spaghetti Kernals ...	40 lbs.
Bacon	17 lbs.	Barley Flakes	7 Packets
Sausages	20 lbs.	Tea	32 lbs.
Fish Fillets	1 Box	Dried Egg	1 Packet
Dried Peas	3 cwt.	Dates	10 Packets
Flour.....	1 cwt.	Date Paste	70 lbs.
Castor Sugar	164 lbs.	Fish Paste	1 Jar
Scone Flour.....	9 Packets	Preserved Plums	2 lb.

Tinned Goods

Pears.....	9 tins	Spinach	1 tin
Grape Fruit	16 tins	Carrots	3 tins
Fruit Cocktail	3 tins	Spaghetti	8 tins
Grape Fruit Juice	7 tins	Sausage	5 tins
Grapes	3 tins	Bacon.....	11 tins
Pineapple	1 tin	Potted Meat	1 tin
Jam	18 tins	Brawn	1 tin
Fruit.....	9 tins	Pork	3 tins
Marmalade	5 tins	Meat	19 tins
Fruit Salad	3 tins	Rabbit	1 tin
Peaches.....	2 tins	Sardines.....	4 tins
Apples	3 tins	Whiting.....	1 tin
Plums	4 tins	Pilchards	16 tins
Orange Juice	3 tins	Mussels.....	334 tins
Apple Juice	1 tin	Fish	10 tins
Milk	94 tins	Codroe Paste.....	1 tin
Tomatoes.....	13 tins	Cod Roes	3 tins
Tomato Juice	25 tins	Salmon	12 tins
Beetroot	8 tins	Crab Paste.....	2 tins
Peas	87 tins	Cod Liver Paste	1 tin
Vegetables	27 tins	Fried Fish Cakes	2 tins
Beans	9 tins	Minced Fish.....	1 tin
Meat Soup	20 tins	Hake	3 tins
Vegetable Soup	9 tins	Pickle.....	4 tins

Food Preparation Premises

The bakehouses, cafés, fish and chip premises, canteens and other premises where food is prepared, stored or sold are inspected as frequently as possible and efforts are made to educate the food handlers in clean food handling and also to improve the premises. Co-operation exists between the Surveyor and this Department to secure that all new premises erected or adapted as food premises reach the desired standard in design and equipment and the relationship with the local

food office in respect of new licences is good. Much still remains to be done in educating the food handler and securing cleaner conditions.

The number of premises registered for the manufacture of preserved food is 25.

Milk Supply

There are 34 dairy farms in the district with an approximate number of 390 cows. The number of inspections carried out totalled 121. The number of samples of milk taken for bacteriological examination was 71 and they are classified below:—

Class	Total No. of samples taken for examination	Satisfactory	Unsatisfactory
Designated:			
‘Tuberculin Tested’	2	2	—
‘Accredited’	1	1	—
‘Pasteurised’	6	5	1
‘Tuberculin Tested’ (Pasteurised).....	4	4	—
Ordinary	49	39	10
Sterilised.....	—	—	—
Heat-treated	9	8	1
TOTALS	71	59	12

The samples of ordinary milk were submitted to the Methylene Blue Test and were also examined for Coliform Bacillus. It is interesting to note that 39 samples of ordinary milk were of accredited standard. In each case, the unsatisfactory samples were followed up by farm visits, where situated in the district, and further samples were obtained after supervision of the milking and advice on methods of production.

Five samples were examined for the presence of tubercle bacillus with negative results.

The types of, and approximate percentages of each milk supplied are set out in the following figures:—

Pasteurised	41%
Tuberculin Tested	
(Pasteurised)	16%
Heat-treated.....	5%
Sterilised	9%
Raw Milk.....	16%
Tuberculin Tested	11%
Accredited	2%

Ice Cream

The manufacture and sale of ice cream has been supervised during the year. There are 10 registered manufacturers within the district and the number of retailers on the register is 41. The number of visits made to Ice Cream premises was 95 and the number of samples

taken was 41. The samples were submitted to the County Analyst for bacteriological examination and were classified as follows:—

Provisional Grade 1.....	32
Provisional Grade 2.....	5
Provisional Grade 3.....	4
Provisional Grade 4.....	Nil

The four grade 3 samples were followed up by further samples and visits.

Food and Drugs Act—Sampling

By arrangement with the County Council I am authorised to act as a Sampling Officer on behalf of the County Council within the Urban District of Bromsgrove, and to appear on behalf of the County Council in any court or legal proceedings. Any sampling under this arrangement is independant of, and in addition to sampling which may be done by the County Sampling Officers.

Forty-four samples of milk were submitted for analysis under this arrangement—30 were "Formal" Samples and 14 "Informal" Samples. The number certified as genuine was 39 and the number adulterated was 5. The "adulterated" samples were slightly deficient in fat. Follow-up samples proved to be genuine and the vendors were cautioned.

SANITARY CIRCUMSTANCES OF THE DISTRICT

Water Supply

98.1% of the houses in the district obtain their water supply from the Water Company's mains. There are 141 houses relying on well or spring supplies. The number of wells closed during the year was 41 serving 54 houses following the results of samples taken or the extension of mains to the outlying parts of the district.

The 61 samples of water taken from wells and springs were classified as follows:—

<i>Satisfactory</i>		<i>Unsatisfactory or Doubtful</i>	
<i>Chemical Analysis</i>	<i>Bacteriological Examination</i>	<i>Chemical Analysis and/or</i>	<i>Bacteriological Examination</i>
14	14		47

Drainage and Sewerage

Per cent. of whole

No. of houses with separate W.C.'s	6139	83%
No. of houses with combined W.C.'s	458	6%
No. of houses with privies	158	2%
No. of houses with pails or chemical closets	583	8%
No. of combined pails	15	0.2%
No. of houses with waste water closets	26	0.3%
No. of houses served by cesspools and septic tanks. (1023 installations)	1202	16.3%
No. of houses with fixed baths	4625	63%

The houses with privy or pail sanitary accommodation are mainly the older type properties in the district, situated where sewers are not available. They are mostly of a type which will be dealt with under the demolition order provisions of the Housing Act when the time is right for this action.

The number of houses, excluding new houses, which were connected to the sewers during the year was 38.

In September 1948 the new cesspool emptying machine was delivered. The Council decided to empty cesspools in the parts of the district where no sewers are available at a charge of ten shillings for emptying.

The work done by the machine to the end of 1948 is summarised in the following figures:—

No. of Cesspools emptied	247
No. of loads from Cesspools	305
No. of Gullies Cleansed.....	1109
No. of Privies emptied	28
No. of Pails emptied	33

During 1949 the Council adopted a "free" emptying service.

HOUSING

The work carried out under the Housing Acts is summarised in the Table A. It will be observed that only two demolition orders were made during the year. There are many old and dilapidated houses in the district and when the housing situation improves it will be necessary to serve demolition orders in respect of a large number of dwellings. Only those houses which are structurally dangerous are at present dealt with by way of demolition, as until more houses are built it is essential that as many dwellings should be kept in use as possible.

Action to secure repairs has been confined to the provisions of the Public Health Act to secure that at least the premises are maintained in a weatherproof condition.

RODENT CONTROL

The Urban District is free from any major infestations of rats. The maintenance treatment of the Spadesbourne Brook, and sewers in conjunction with block control of centres of infestation have reduced the rat problem to minor, scattered infestations. It is very necessary to continue the Surveys and treatments of the small infestations to prevent any serious build-up of the rat population. Most of the infestations found around dwelling houses are usually associated with the domestic poultry or pig keeper.

The work carried out by the Rodent Operative is summarised in the following figures:—

No. of Test Baits laid (Sewers)....	82
No. of Prebaits laid	9796
No. of Poison Baits laid.....	2680
No. of Post Baits laid.....	499
No. of Treatments at Council premises (Sewage Works, Tips, etc.)	16
No. of Sewer Treatments	1
No. of Brookcourse Treatments	2

SUMMARY OF DEFECTS REMEDIED AND IMPROVEMENTS EFFECTED AFTER THE SERVICE OF NOTICES

Conversion to modern W.C.'s	....	....	....	3
Additional W.C.'s or new pedestals provided	....	....	12	
Structural repairs to W.C.'s	....	....	....	13
Defective drains repaired	....	....	....	36
Obstructed drains dealt with	....	....	....	39
W.C. Flushing cisterns provided	....	....	....	7
Ashbins provided	....	....	....	126
Floors repaired	....	....	....	32
Roofs repaired	....	....	....	72
Wallplaster made good	....	....	....	92
Ceiling plaster made good	....	....	....	76
Eavespouting and downspouts repaired and renewed	....	....	....	34
Windows and doors repaired	....	....	....	32
New washing coppers provided	....	....	....	4
Staircases repaired	....	....	....	10
Walls rebuilt or repaired	....	....	....	45
Firegrates renewed or repaired	....	....	....	14
Chimneys repaired	....	....	....	16
Washing coppers repaired	....	....	....	11
Privy Middens repaired	....	....	....	2
Burst pipes	....	....	....	12
New pails provided	....	....	....	3
Repairs to sinks	....	....	....	6
Pumps repaired	....	....	....	1
Houses Disinfected	....	....	....	17
Houses Disinfested—Council Houses	....	....	....	5
Other houses	....	....	....	3

PETROLEUM ACTS

Fifty-seven licences were issued during 1948 for the storage of petroleum and one licence for the storage of carbide of calcium.

HOUSING

Table A.

Number of new houses erected during the year:—

(i) By the local authority	....	....	....	....	139
(ii) By other local authorities	....	....	....	....	—
(iii) By other bodies or persons	....	....	....	....	41
	(H. Assoc. 36, Others 5)				

1. *Inspection of dwelling-houses during the year:—*

(1) (a) Total number of dwelling-houses inspected for defects (under Public Health or Housing Acts)	....	....	525
(b) Number of inspections made for the purpose	....	....	1743
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Household Consolidated Regulations, 1925 and 1932	....	....	76
(b) Number of inspections made for the purpose	....	....	76

(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	2
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	70
2. <i>Remedy of defects during the year without service of formal notices:—</i>	
Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers	161
3. <i>Action under statutory powers during the year:—</i>	
(a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936:	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By owners	Nil
(b) By local authority in default of owners	Nil
(b) Proceedings under Public Health Acts:	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	30
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) By owners	26
(b) By local authority in default of owners	Nil
(c) Proceedings under sections 11 and 13 of the Housing Act, 1936:	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	2
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	7
(d) Proceedings under section 12 of the Housing Act, 1936:	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
4. <i>Housing Act, 1936.—Part IV.—Overcrowding:—</i>	
(a) (i) Number of dwellings overcrowded at the end of the year	
(ii) Number of families dwelling therein	
(iii) Number of persons dwelling therein	
(*No accurate information available. New Survey would be required to provide this information)	
(b) Number of new cases of overcrowding reported during the year	10

(c) (i) Number of cases of overcrowding relieved during the year	7
(ii) Number of persons concerned in such cases	42
(iii) Number of houses again overcrowded after being previously relieved	—

Table B.

ADMINISTRATION OF THE FACTORIES ACTS

PART 1 OF THE ACT

1. INSPECTIONS for the purposes as to health (including inspections made by Sanitary Inspectors):—

Premises	No. on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	8	15	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	87	73	3	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)				
TOTAL	95	88	3	—

2. CASES IN WHICH DEFECTS WERE FOUND:—

Particulars	Number of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness.....	4	4	—	1	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation.....	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conv.					
(a) insufficient....	—	—	—	—	—
(b) Unsuitable defective.....	—	—	—	—	—
(c) Not separate for sexes.....	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork	4	4	—	1	—
TOTAL	8	8	—	2	—

